



# Citizen Advocate Volunteer Background Check Authorization

To ensure the safety of all people involved in our programs (volunteers, participants & staff), Macomb Township has instituted a policy to do background checks on part-time staff.

Please fill out the form and submit it to the Macomb Township Fire Department.

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_

Drivers License Number \_\_\_\_\_ Gender:      Female      Male

National Origin:	American Indian/Alaskan Native	Asian/Pacific Islander
	Black	White
		Hispanic

I authorize Macomb Township to investigate my background as is determined necessary for the particular activity(ies) for which I am interested in working.

\_\_\_\_\_  
Signature (Parent or guardian if under 18)

\_\_\_\_\_  
Date

These items are required to enable Macomb Township to conduct accurate background checks and will be used only for that purpose. Macomb Township supports and complies with the laws which are enacted to protect and safeguard the rights and opportunities of all people, without being subjected or exposed to harassment or discrimination of any kind, including age, national origin, sex, race, religious affiliation, color, height, weight or marital status.